Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED OMB No. 1004-0137 Expires: March 31, 200
5. Lease Serial No.

Engr Geol Surf

SUNDRY	Jicarilla Contract 35			
Do not use the	is form for proposals t ell. Use Form 3160-3 (A	o drill oppgal neg APD) for such pr	phieran PM 1	6. LiffIndian, Allottee or Tribe Name Jicarilla Apache Tribe
SUBMIT IN TRI	PLICATE- Other instr	ructions on reve 070	RECEIVED rse side. FARMINGTO!	7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well Oil Well 2. Name of Operator CDX RIO, LI 3a. Address 4801 N. Butler, Suite 2000, Far 4. Location of Well (Footage, Sec., 7)	mington NM 87401	3b. Phone No. (include area code) 505-326-3003		8. Well Name and No Jicarilla Apache Tribal 35 #1 9. API Well No. 30-039-21992 10. Field and Pool, or Exploratory Area Basin Dakota
1450 FSL & 1500 FWL Sec 1, T24N, R5W	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			11. County or Parish, State Rio Arriba, NM
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NATUR	RE OF NOTICE, RI	EPORT, OR OTHER DATA
TYPE OF SUBMISSION		TY	PE OF ACTION	
Notice of Intent Subsequent Report Final Abandonment Notice	✓ Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (Statement of Statement of Statem	Well Integrity Other
If the proposal is to deepen direct Attach the Bond under which the following completion of the invo	tionally or recomplete horizontally e work will be performed or provid- olved operations. If the operation real Abandonment Notices shall be f	 give subsurface location the Bond No. on file versults in a multiple comp 	ns and measured and true with BLM/BIA. Require letion or recompletion in	y proposed work and approximate duration thereof. e vertical depths of all pertinent markers and zones. d subsequent reports shall be filed within 30 days a new interval, a Form 3160-4 shall be filed once ation, have been completed, and the operator has
10/21/04 - Pumped 500 gall back, place back on produc		remove scale build-up	o. Displace with 10 bl	bis water. Allow to soak 24 hours and swab
	K	140:00		AFMSS Adjyd QMM

	Appvi OP						
StECO.							
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)							
David C. Smith	Title Production Engineer						
Signature / C	10/25/2004						
THIS SPACE FOR FEDERAL	OR STATE OFFICE USE						
	on afilMulti-Resources Date JAN 1 4 2005						
Conditions of approval, if any, are attached. Approval of this notice does not warrancertify that the applicant holds legal or equitable title to those rights in the subject lewhich would entitle the applicant to conduct operations thereon.	ont or Office						

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.